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Dear Educators:

We are writing to provide important information about influenza and plans to control influenza in school populations. Each fall, the beginning of the school year is closely followed by the arrival of the influenza season. While it is not possible to predict with certainty the severity of the approaching influenza season, federal, state and local health agencies are taking steps to be prepared. It is possible that there will be more influenza cases than usually occur among children and young adults this season. Fortunately, resources are available to help educational settings prepare and respond to influenza and to other health events that may arise.

The enclosed toolkit for school-settings from the Centers for Disease Control and Prevention (CDC) offers a wealth of up to date recommendations. It is a valuable resource. The Montana Department of Public Health and Human Services (DPHHS) and the Montana Office of Public Instruction (OPI), in collaboration with your local health agency, will provide additional resources as these are needed to help you prepare your school to control influenza in students and staff.

Financial Resources Available

Financial resources, ranging from \$1,000 to \$3,000 have been earmarked for each school in the state. While this amount is modest, the funding may be used to support a variety of activities related to preparing for influenza. For example, funds may be used to support staff time related to influenza control, to purchase hand sanitizer or health related educational materials, or in a variety of other ways. To receive this funding, the first thing to do is contact your local health department to obtain certain materials you will need to apply for these funds. Your school or district will then need to: 1) complete a checklist evaluating readiness and return the checklist to your local public health department, 2) identify a point of contact in your school and local public health agency and assist your local public health agency with tracking school absenteeism, and 3) assist your local public health department with the provision of, or appropriate referrals to, vaccine that may be available for the novel H1N1 influenza.

Steps to Take Now

There are a number of measures schools should take now to help lessen the potential impact of influenza on students and staff, as well as the local community. Based on the current severity of illness caused by influenza strains expected to be circulating this fall (novel H1N1 and others), the steps listed in Attachment A, *Steps Schools can Take Now to Prepare for Influenza Season* should be strongly considered by school officials. At this time, the CDC, DPHHS and OPI do not consider school closure a primary means of controlling influenza in

either a school or a community. School closure is unlikely to be recommended unless absenteeism levels interfere with the school's ability to function (e.g., not enough teachers) or if a school were comprised of a large majority of individuals at high risk for complications because of underlying medical conditions.

Vaccination

A novel H1N1 influenza vaccine is being evaluated for use this fall. After this vaccine is approved by the FDA and sufficient supply is available, providing it to school age children will be a priority. Attachment B, *Target Groups for Vaccination for Novel H1N1 Influenza*, describes the recommended target groups. Whether or not to organize vaccination clinics at individual schools is one of the decisions to be made at the local level. This decision will depend on a variety of issues including vaccine availability and staffing resources. We are requesting all schools to work closely with local public health officials to assist with the provision of vaccine or provide appropriate referrals to vaccination clinics as local plans are finalized. There are no plans at this time to require vaccine for school entry or attendance.

Schools can play a key role to educate students and staff, and promote ways to reduce the spread of influenza. Attachment C, *Action Steps for Schools to Prevent the Spread of Influenza* provides a list of recommendations to prevent the spread of influenza in school settings. The Montana Office of Public Instruction and the Department of Public Health and Human Services will be working closely with local public health agencies to provide you with timely information as it becomes available.

In many cases, local planning and response efforts will be guided by vaccine supply, staffing resources and the presence of influenza cases. It will be important for schools to work closely with local public health officials to coordinate efforts. Please contact your local health department if you have any questions or concerns.

Sincerely,



Anna Whiting Sorrell, Director
Montana Department of Public Health
And Human Services



Denise Juneau, Superintendent
Montana Office of Public Instruction

Attachment A: Steps Schools can Take Now to Prepare for Influenza Season

- Identify specific point of contacts within your school and provide this information to your local health department. This will help ensure planning and response efforts are integrated and that communication processes for responding to and monitoring outbreaks of illness are clear.
- Stay informed. We encourage you to monitor national, state and local web resources for the most current recommendations. **(DPHHS, OPI and CDC web sites listed)**
- Review and update your emergency plans and ensure all your contact lists are up-to-date. If you do not have such a plan, we encourage you to develop one. Completion of the attached planning checklist will assist your district in identifying areas that may need additional attention. To initiate or build upon an all-hazards plan, visit the US Department of Education's website at: <http://www.ed.gov/emergencyplan>.
- Promote good hand hygiene and respiratory etiquette, including the teaching of proper hand washing techniques and providing opportunities and appropriate supplies for hand washing. Your local public health department will have printed resources available to help reinforce these messages.
- Develop response and communications plans to ensure that students, faculty, or staff with influenza like illness (ILI) (i.e., fever and either cough or sore throat) do not come to school.
- Encourage parents and guardians to monitor their school-aged children for symptoms of influenza-like illness and encourage faculty and staff to also watch themselves for symptoms.
- Current recommendations from the CDC are for all ill persons to remain out of school and work for at least 24 hours after resolution of fever *without* the use of fever-reducing medications. If a person (either student or staff) develops symptoms while at school, he or she should be isolated promptly in a separate room and sent home. Remind her or him that most people, including children, recover quickly without treatment, but those with underlying health conditions (pregnancy, asthma, diabetes, neuromotor or neuromuscular conditions such as cerebral palsy, immune compromise, and other diseases) or signs of severe illness should call their health care provider about care, including antiviral administration if appropriate.
- Advise parents and guardians to develop contingency plans should their children become sick and need to stay home.
- Establish a baseline for attendance of students, faculty, and staff. Track attendance to identify changes and trends and share this information with your local public health department. If your school experiences sudden or sustained increases in the number of persons with influenza-like illness, contact your local public health department immediately to report this information.
- Plan for continuation of instruction and alternative mechanisms for delivery of education content, including virtual learning and leveraging community resources if appropriate and possible.
- Promote early vaccination of students and staff for seasonal influenza to protect against illness from influenza strains other than novel H1N1 influenza.

Attachment B: Target Groups for Vaccination for Novel H1N1 Influenza

The CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that certain groups of the population receive the novel H1N1 vaccine when it first becomes available. The ACIP considered several factors, including current disease patterns, populations most at-risk for severe illness based on current trends in illness, hospitalizations and deaths, how much vaccine is expected to be available, and the timing of vaccine availability. At this time, individuals aged 65 and older are not candidates for the novel H1N1 vaccine and appear to have pre-existing protection from infection. However, all individuals aged 65 and over should receive seasonal influenza vaccination.

Initial target groups for novel influenza A (H1N1) vaccination programs and a subset of these target groups to receive vaccine if initial vaccine availability is not sufficient to meet demand*

Initial target groups

ACIP recommends that programs and providers provide vaccine to all persons in the following five initial target groups as soon as vaccine is available (order of target groups does not indicate priority):

- pregnant women,
- persons who live with or provide care for infants aged <6 months (e.g., parents, siblings, and daycare providers),
- health-care and emergency medical services personnel,
- **children and young adults aged 6 months--24 years, and**
- persons aged 25--64 years who have medical conditions that put them at higher risk for influenza-related complications.§

Subset of initial target groups

ACIP recommends that all persons in the following subset of the five initial target groups receive priority for vaccination if vaccine availability is not sufficient to meet demand (order of target groups does not indicate priority):

- pregnant women,
- persons who live with or provide care for infants aged <6 months (e.g., parents, siblings, and daycare providers),
- health-care and emergency medical services personnel who have direct contact with patients or infectious material,
- children aged 6 months--4 years, and
- children and adolescents aged 5--18 years who have medical conditions that put them at higher risk for influenza-related complications.§

* Priority should be given to persons in the subset of the five target groups only if initial vaccine availability is not sufficient to meet demand for all persons in the five target groups. As vaccine availability increases, vaccination programs should be expanded to include all members of the initial target groups. Vaccination of other adult populations is recommended as vaccine availability increases. Based on vaccine supply and resources, local public health agencies will determine whether the initial target group or subset will receive initial vaccine supplies.

§ Medical conditions that confer a higher risk for influenza-related complications include chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, cognitive, neurologic/neuromuscular, hematologic, or metabolic disorders (including diabetes mellitus) and immunosuppression (including immunosuppression caused by medications or by human immunodeficiency virus).

Attachment C: Action Steps for Schools to Prevent the Spread of Influenza

Take the following steps to help keep students, teachers, and staff from getting sick with influenza. These steps should be followed ALL the time and not only during influenza season.

- **Educate and encourage students and staff to cover their mouth and nose** with a tissue when they cough or sneeze. Also, provide them with easy access to tissues and running water and soap or alcohol-based hand cleaners. Remind them to cover coughs or sneezes using their elbow instead of their hand when a tissue is not available.
- **Remind teachers, staff, and students to practice good hand hygiene** and provide the time and supplies for them to wash their hands as often as necessary.
- **Send sick students, teachers, and staff home** and advise them and their families that sick people should stay at home until at least 24 hours after they no longer have a fever or signs of a fever (without the use of fever-reducing medicine).
- **Clean surfaces and items** that are more likely to have frequent hand contact such as desks, door knobs, keyboards, or pens, with cleaning agents that are usually used in these areas.
- **Move students, teachers, and staff to a separate room** if they become sick at school until they can be sent home. Limit the number of staff who take care of the sick person and provide a surgical mask for the sick person to wear if they can tolerate it.
- **Have Personal Protective Equipment (PPE) such as masks** available and ensure the equipment is worn by school nurses and other staff caring for sick people at school.
- **Encourage early medical evaluation for sick students and staff** at higher risk of complications from influenza. People at high risk of influenza complications who get sick will benefit from early treatment with antiviral medicines.
- **Stay in regular communication with local public health officials.**

If the influenza conditions become MORE severe, schools should consider adding the following steps:

- **Extend the time sick students, teachers, or staff stay home** – In general, CDC recommends that people with influenza-like illness remain at home until at least 24 hours after they are free of fever (100° F [37.8°C]), or signs of a fever without the use of fever-reducing medications. More stringent guidelines and longer periods of exclusion – for example, until complete resolution of all symptoms – may be considered for people returning to a setting where high numbers of high-risk people may be exposed. **Decisions about extending the exclusion period should be made at the community level, in conjunction with local and state health officials.**
- **Allow high-risk students, teachers, and staff to stay home.** These students, teachers, and staff should make this decision in consultation with their physician and/or health professional.

- **Conduct active fever and symptom screening** of students, teachers, and staff upon arrival at school. Any sick students, teacher, or staff should be separated from others, offered a surgical mask, and sent home.
- **Find ways to increase social distances** (the space between people) at school such as rotating teachers between classrooms while keeping the same group of students in one classroom, moving desks farther apart, or postponing class trips.
- **Consider how and when to dismiss students** by working closely with your local and state public health officials. If you decide to dismiss all students, notify your local public health department.

Follow these steps to prepare for the influenza during the 2009-2010 school year:

- Review and revise existing pandemic plans and focus on protecting high-risk students, teachers, and staff.
- Update student, teacher, and staff contact information as well as emergency contact lists.
- Identify and establish points of contact with the local public health and education agencies.
- Develop a plan to cover key staff positions, such as the school nurse, when staff stay home because they are sick.
- Develop communication tools (e.g., letters to parents, Web site postings) that can be used to send sick students home, dismiss students, and to remind parents and staff how long sick students and staff should remain at home. Check out Preparing for the Flu: A Communication Toolkit for Schools (Grades K-12) for basic information and communication resources such as letters and flyers for parents. The toolkit is available at www.flu.gov.
- Review school policies and awards criteria to encourage social distancing and avoiding any incentives for students or staff to go to school when sick (e.g., cancel perfect attendance awards).
- Develop a school dismissal plan and options for how school work can be continued at home (e.g., homework packets, Web-based lessons, phone calls), if school is dismissed or students are sent home when sick.
- Collaborate with the local health department, community organizations, local businesses, and social services on a plan for flu response.
- Help families and communities understand the important roles they can play in reducing the spread of flu in schools.

For more information contact your local public health department or:

- **Visit:** www.flu.gov
- **Contact CDC 24 Hours/Every Day**
- 1 (800) CDC-INFO (232-4636)
- TTY: (888) 232-6348
- cdcinfo@cdc.gov